

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	451	10-31-96
TYPIST	ZIA	10-31-96
VERIFIER	507	11-1-96
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date											
Final	Original	8	9	10	11	12	13	14	15	16	17	18
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99	99											
100	100											

SYMBOLS

✓	Rejected
-	Allowed
— (Through number)	Cancelled
↔	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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